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HIV Issues in Alberta: The 1993 Survey of Adults

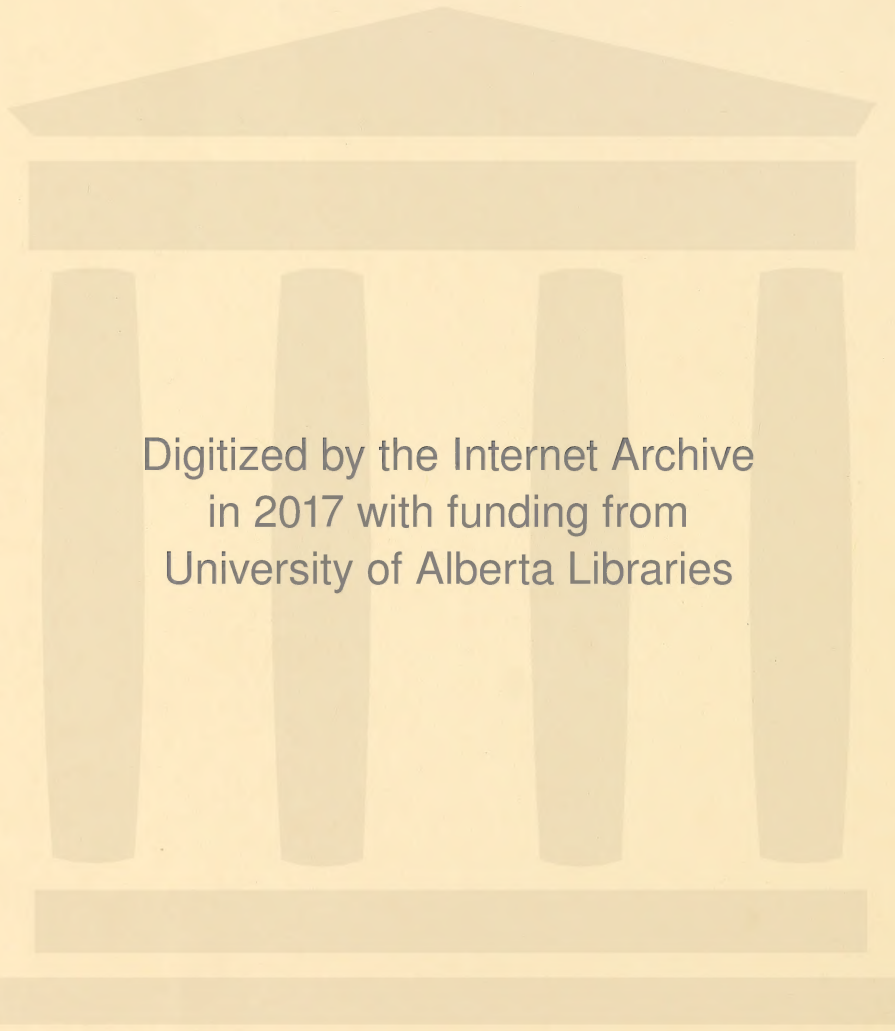
Summary Report

**Prepared for Alberta Health
by:**

**Herbert C. Northcott, Ph.D.
Social Science Consulting**

February 23, 1994

Alberta
HEALTH



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**HIV/AIDS ISSUES IN ALBERTA:
THE 1993 SURVEY OF ADULTS**

Summary Report

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Prepared for: Provincial AIDS Program, Alberta Health

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THE 1992 SURVEY OF ADULTS
WITH AIDS IN ALABAMA

Summary Report

February 27, 1993

Prepared for: The Alabama AIDS Program, Alabama Health

Department, Department of Health, Alabama

Health Services, Alabama

ISBN - 0-7732-1368-4

HIV/AIDS ISSUES IN ALBERTA: THE 1993 SURVEY OF ADULTS

This report summarizes a more detailed and more technical document of the same title. Both reports discuss the findings of the 1993 survey of adults on HIV/AIDS issues in Alberta.

INTRODUCTION

The 1993 survey of adults is the third in a series of studies commissioned by the Provincial AIDS Program and administered by the Population Research Laboratory of the Department of Sociology at the University of Alberta as part of its annual survey of Albertans. The previous studies were conducted in 1992 and in 1990 and examined public knowledge, attitudes, and behaviours regarding HIV/AIDS.

The objectives of the 1993 HIV/AIDS study were threefold. The first objective was to assess public opinion on a variety of public education issues including opinion regarding HIV-related education in schools, in the media and in public places; ways to encourage acceptance of persons living with HIV/AIDS and knowledge of modes of HIV infection and terms commonly used in HIV prevention messages. The second objective was to explore public opinion on several issues relating to the use of condoms including the content and location of public health messages regarding condoms, perceived effectiveness of condom use, and appropriate places for the sale of condoms. Finally, two questions were asked about HIV/AIDS testing to determine what would motivate persons to seek an HIV/AIDS test and where they would go for testing.

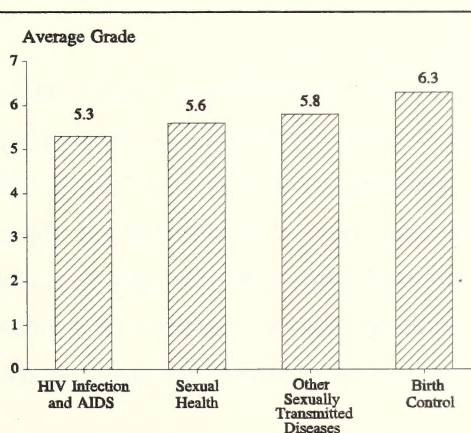
METHODS

A total of 1274 persons 18 years of age and older residing in Alberta were interviewed by telephone in February and March of 1993. The persons interviewed were selected so as to be representative of all adults living in Alberta. Three out of every four persons asked to participate in the survey agreed to do so.

PUBLIC EDUCATION AND PUBLIC KNOWLEDGE REGARDING HIV/AIDS

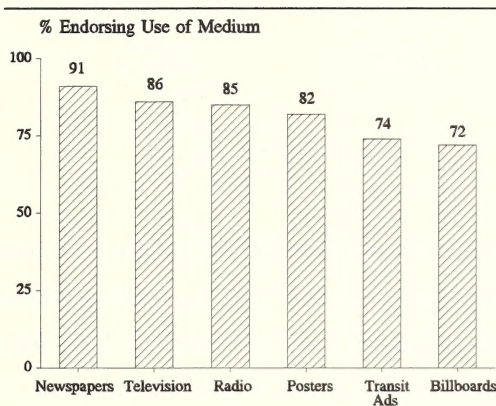
Regarding education in the schools, respondents were asked in what grade they thought education should start about sexual health, HIV infection and AIDS, other sexually transmitted diseases, and birth control. Virtually all respondents thought that these topics should be taught in school and most felt that education on these topics should start sometime in grades 4 through 7. Figure 1 shows the average grade in school when people think that education should begin on these various topics.

Figure 1: Average Grade in School for
Starting Education on Selected Topics



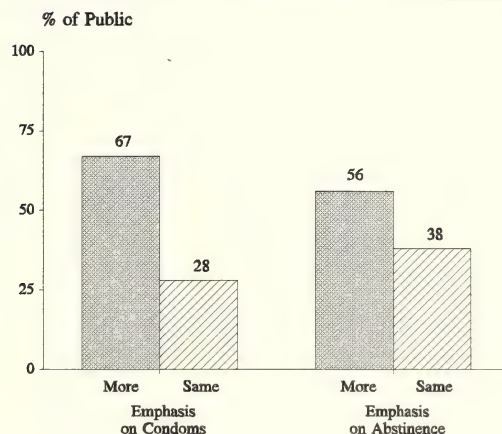
Respondents were advised that "Research in Alberta has shown that people need frank messages to encourage them to change sexual behaviours through which HIV infection can be spread." They were then asked if they thought that these frank messages should appear on television, radio, in newspapers, transit ads (bus, LRT, etc.), posters and billboards. Figure 2 shows that the majority of the public think that frank messages should appear in these various media.

Figure 2: Percentage of the Public Who Think Frank Messages Regarding Sexual Behaviours Should Appear in Selected Media



Respondents were asked if there should be more, less, or about the same emphasis on the use of condoms and on abstinence from sexual intercourse in public health messages about the prevention of HIV/AIDS and other sexually transmitted diseases. Figure 3 indicates that the majority of respondents thought that there should be more emphasis in public health messages about both the use of condoms and abstinence from sexual intercourse. Further, most of those who did not indicate a preference for increased emphasis on either condoms or abstinence felt that the present emphasis was sufficient and wished to see it continued.

Figure 3: Public Opinion Regarding the Emphasis in Public Health Messages



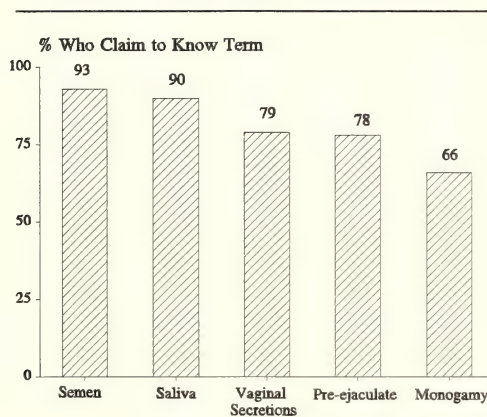
The persons surveyed were also asked "What can be done to encourage your community to accept without discrimination members of your community who have HIV/AIDS?" The great majority of suggestions referred to the need for more public education about HIV, the AIDS disease itself, and how a person gets the disease. Frequently mentioned methods for educating the public included sex education in the schools, public forums, and use of the mass media.

Finally, respondents were asked if they were "very sure" or "uncertain" about the meaning of the following terms used in public health messages about HIV infection: saliva, semen, pre-ejaculate, vaginal secretions, and monogamy. Further, respondents who were very sure of the meanings of these terms were asked how likely (very, somewhat, not at all) HIV infection can be spread by these various means and, in addition, by blood.

Figure 4 shows that 9 out of 10 people claimed to understand the terms semen and saliva, 8 out of 10 people claimed to understand the terms vaginal secretions and pre-ejaculate, while 2 out of every 3 claimed to understand the term monogamy. Most were aware that blood and semen can spread HIV infection. Most said that it was either very likely or somewhat likely that

HIV infection can be spread by vaginal secretions and pre-ejaculate. However, many incorrectly thought that HIV can be spread by saliva. Finally, almost half of the persons who said that they understood the term monogamy thought it was a potential risk factor. It appears that the public could be better informed about terms such as monogamy, pre-ejaculate, vaginal secretions, and saliva, and their role in HIV infection. It follows that programmers of public health messages should avoid using these terms when they are not required and should take care to explain these terms when it is necessary to use them.

Figure 4: Knowledge of Selected Terms

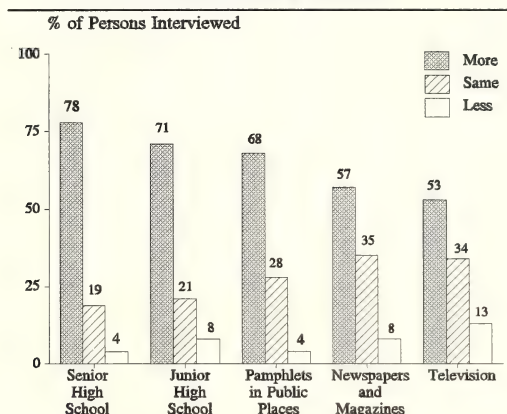


PUBLIC OPINION REGARDING THE USE AND SALE OF CONDOMS

About one-third of the persons interviewed in both the 1992 and 1993 surveys said that they thought condoms were very effective and about two-thirds of respondents thought that they were somewhat effective for preventing getting the HIV/AIDS virus through having sex. That is, people generally perceive condoms to be effective and, accordingly, they tend to advocate an increased emphasis in public health messages on condom usage. Furthermore, regarding the placement of these public health messages, the majority favoured an increased focus on the

effectiveness of condoms for senior and junior high school instruction, pamphlets in public places, newspapers and magazines, and television.

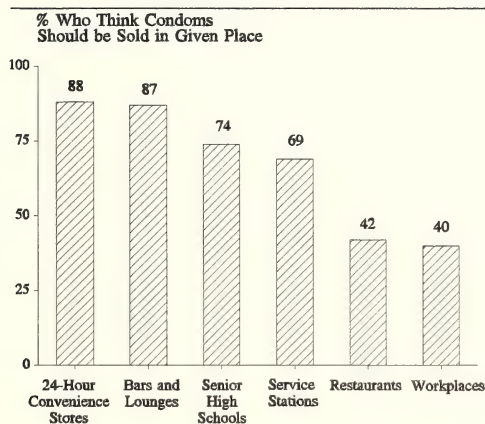
Figure 5: Public Opinion Regarding the Appropriate Level of Emphasis on Condom Use in Selected Media and Places



The persons interviewed were asked in what places they thought it would be acceptable for the public to buy condoms. Figure 6 shows that a large majority thought that condoms should be sold in 24-hour convenience stores, bars and lounges, senior high schools, and service stations. In contrast, most respondents were opposed to the sale of condoms in restaurants and workplaces.

People who endorsed the sale of condoms in a given establishment were asked where they thought condoms should be sold -- at the counter or from machines in washrooms or both. Restricting the sale of condoms solely to over-the-counter transactions tended to be unpopular. While many people do not mind having them available at the counter, most preferred that they be available at the same time from machines located in less public places such as washrooms.

Figure 6: Percentage of Respondents Who Think Condoms Should be Sold in Selected Places



TESTING FOR HIV/AIDS

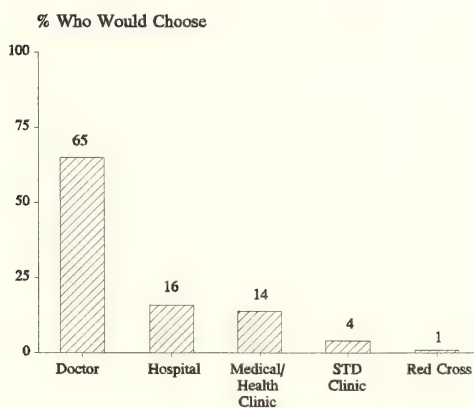
Respondents were asked "What kinds of situations in your personal life would lead you to get a blood test for HIV/AIDS?" One in four said that there was no situation that would lead them to seek testing and another 9 percent answered "don't know." A total of 840 (out of 1274) persons interviewed gave at least one response while 234 persons listed two situations that would motivate them to get a blood test for HIV/AIDS.

The single most frequently mentioned situation that would lead a person to get a blood test for HIV/AIDS was a blood transfusion. Nevertheless, several situations related to sexual behaviour (new relationships/multiple partners, unprotected sex, spouse/partner being unfaithful, getting married) also provided a major motivation for seeking an HIV/AIDS test. Further, some respondents indicated that they would seek a blood test following contact with blood or with a person with AIDS, or if they worked in a high-risk environment or were a drug user.

Additionally, a group of responses focused on concerns arising from a variety of situations, such as an undiagnosed illness or following surgical or dental procedures. Finally, a few respondents mentioned that they would be tested if required to do so, for example, for insurance purposes.

Respondents were also asked "If you thought you were at risk of HIV/AIDS where would you go for an HIV/AIDS test (doctor, hospital, medical/health clinic, Red Cross, STD clinic, other)?" Figure 7 shows that two in three said that they would go to a doctor. Almost one in three said that they would go to either a hospital or to a medical/health clinic. Only a very few said that they would go to an STD clinic. Although even fewer (about 1%) chose the Red Cross, the fact that even these few might donate blood to learn their HIV status is of concern.

Figure 7: Places Where Respondents Would Go for an HIV/AIDS Test



CONCLUSION

It is concluded that there is strong public support for frank public health messages dealing with HIV/AIDS transmission and prevention. Further, there is strong public support for wide dissemination of these messages in a variety of formats including the mass media and school

curricula. With respect to the schools, most respondents felt that education on topics such as sexual health, HIV infection and AIDS, and other sexually transmitted diseases should begin sometime in grades four through seven. The majority of respondents thought that there should be more emphasis in public health messages on both the use of condoms and abstinence from sexual intercourse.

Regarding public knowledge, there appears to be room for improvement in the public's understanding of terms such as pre-ejaculate and vaginal secretions and their role in HIV transmission. While saliva is a well-understood term, its role in HIV transmission is not as well known; that is, many appear to believe erroneously that saliva can be infectious. Finally, monogamy appears to be a frequently misunderstood term and should not be used in public health messages unless it is also clearly defined within that message.

It is also concluded that the public widely believes that the use of condoms is effective in preventing HIV transmission and there is considerable support for the promotion of condom use in public health messages. Further, the public is widely supportive of the sale of condoms in places such as convenience stores, bars and lounges, senior high schools, and service stations. Finally, while many think that condoms should be available for sale at the counter, most also prefer that condoms be sold from machines located in washrooms where the purchase can be more private and discrete.

Regarding testing, it is concluded that getting a blood transfusion (despite the extremely high degree of safety of blood transfusions today) and having any one of a variety of sexual experiences are the main reasons that would motivate seeking an HIV/AIDS test. Such testing would typically be sought from a doctor or from a hospital or medical clinic. Very few respondents indicated that they would choose either an STD clinic or the Red Cross for HIV/AIDS testing.

Analyses were done (see the longer, more technical report) to determine whether or not public opinion on HIV/AIDS issues varied depending on the respondent's sex, age, marital status, residential location, or education. Opinions tended to be similar among males and females, persons under 40 and 40+ years of age, persons currently married and not currently married, residents of Calgary, Edmonton and the remainder of the province, and persons with 0-12 and 13+ years of education. Where differences of opinion did exist, they were usually of modest magnitude and suggested that females, older persons, the currently married, Albertans living outside of the major cities of Edmonton and Calgary, and the less educated tended to be somewhat more conservative in their opinions. Nevertheless, these various categories of respondents tended to be more similar than dissimilar in their views.

Finally, this study shows that Albertans have a high level of concern about HIV/AIDS issues and are most interested in various efforts to stop HIV transmission and prevent AIDS. HIV/AIDS is one of the most pressing concerns on the public's mind today and public opinion on HIV/AIDS issues reveals a consensus and willingness to endorse serious, frank, and far-reaching efforts to educate the public about this serious threat to Alberta's collective health and well-being.

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